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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of
Henning VOLLERT

Examiner: **HANDY, Dwayne K.**

Application No.: **09/646,986**

Art Unit: **1743**

Filed: **September 26, 2000**

Title: **MINIATURIZED MICROTITER
PLATE FOR HIGH THROUGHPUT
SCREENING**

TELEFAX CERTIFICATE

I hereby certify that this correspondence is being
transmitted via facsimile to the Commissioner for
Patents, Alexandria, VA 22313, on

August 11, 2004

Date of transmission

Signature **James H. H. Sr.**

RESPONSE TO NON-FINAL OFFICE ACTION UNDER 37 CFR

1.111

Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

OFFICIAL

Sirs:

Applicants respond to the non-final Office Action issued February 11, 2004 for the above-identified application by traversing all outstanding rejections of pending claims 5 through 13. A request for a three-month extension of time and the required fee accompany this amendment, extending the period of reply to and including August 11, 2004. The Commissioner is authorized to charge any additional fees or credit any overpayment necessitated by this amendment to Deposit Account No. 18-1982.

Arguments begin on page 2 of this paper.

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**FAX TRANSMITTAL
TO THE UNITED STATES PATENT OFFICE**

OFFICIAL

Applicants Docket Number:
DEAV1998/L013 US PCT

Applicants:
Henning VOLLERT

Serial No.
09/646,986

Filing Date:
September 26, 2000

Title of Invention:
MINIATURIZED MICROTITER PLATE FOR HIGH THROUGHPUT SCREENING

CERTIFICATE OF TRANSMISSION

I hereby certify that this correspondence is being transmitted via facsimile to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, **Dwayne K. Handy**, at **703-872-9306**, on Date of Deposit **August 11, 2004**
Printed Name of Person Signing Certificate **Jonas Pierre, Sr.**
Signature _____

Total Number of Pages Sent: 5

Attorney: **F. Aaron Dubberley**
Reg. No. **41,001**
Group Art Unit: **1743**
Examiner: **HANDY, Dwayne K.**

TO: Mail Stop PCT
Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

Please acknowledge receipt of the below-listed documents for the above Application by returning this sheet, signed and dated, by return telefax to (908) 231-2626. If any fees are required, please charge our deposit account (18-1982) in the name of **Aventis Pharmaceuticals Inc.**

- | | |
|--|--|
| <input checked="" type="checkbox"/> Response To Non-Final Office Action Under 37 Cfr 1.111 - (3 pages) | <input type="checkbox"/> Fee Transmittal |
| <input type="checkbox"/> Charge deposit account, in duplicate | <input type="checkbox"/> Petition under 37 CFR _____ |
| <input checked="" type="checkbox"/> Extension of Time Petition (1 page) | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Issue Fee Transmittal & Advance Order | <input type="checkbox"/> Other _____ |
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Receipt Confirmed:

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Dated _____

Aventis Pharmaceuticals Inc., Route 202-206, P.O. Box 6800, Bridgewater, New Jersey 08807, U.S.A. www.aventis.com
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Aventis Pharmaceuticals Inc. complauc (March 2001)